

# A Comparison of AARP's Stated Positions on July 13, 2003 and November 19, 2003 on Prescription Drug Legislation and Medicare Reform

This sheet compares the officially stated AARP position regarding Medicare Reform with the bill that the organization's Washington leadership has chosen to support. Local chapters and individual members of AARP across the country were not asked for their input, their approval or their disapproval.

**The following are quotes from  
the CEO of AARP, William  
Novelli, in a letter to Members  
of Congress on July 13, 2003.**

**What AARP Now  
Supports on  
November 19, 2003**

## **Medicare Privatization**

"AARP opposes [privatization of the Medicare program] that could require beneficiaries to pay even more out-of-pocket" expenses.

The privatization of the Medicare program in the year 2010 – seniors will have to pay more money to stay in traditional Medicare and to keep the same benefits they have today.

## **Retiree Drug Coverage**

"AARP strongly believes that a conference agreement should not result in millions of older and disabled Americans losing their employer-provided prescription drug coverage."

The Medicare Reform Bill will likely cause 2-3 million retirees to lose the prescription drug coverage offered by their former employers.

## **Coverage Gap**

"AARP believes the [coverage] gap should be narrowed further and, ultimately, must be eliminated."

A \$2800 gap in prescription drug coverage, during which seniors will pay all of their drug costs AND continue to pay monthly premiums.

## **Income Relating**

"Altering the level of the [Medicare] benefit based on [seniors] income would erode the universal nature of the program."

Requires seniors who make more than \$80,000 per year to pay a higher Medicare premium.

## **Low-Income Benefits**

"We believe that eligibility for [low-income] assistance should not be limited by an assets test that could prevent otherwise low-income [seniors] from the benefit of reduced cost-sharing."

Requires low-income seniors to prove that they are poor enough to have assistance in buying prescription drugs.